FAX # Note: Original application must be received in the Personnel Department within seven days of the FAX date.

Return to:

CITY OF ROCKVILLE PERSONNEL DEPARTMENT 111 MARYLAND AVENUE ROCKVILLE, MARYLAND 20850-2364 PHONE 240-314-8470 FAX 240-314-8484 TDD 240-314-8137

REVISED 2/03 http://www.ci.rockville.md.us

Directions: Answer each and every question on all four pages of the application. A résumé may be submitted only to supplement information on the application. Résumés may not be used in place of any information requested on the application. Write "N/A" in the answer blank if the question is not applicable to you. Please type or print legibly.

osition Desired			Announceme	_Announcement No		Date	
Name Last Address Street	First	Middle I	Social Secur	ity No			
City E-Mail Address:		State	Zip	Cell No Work No	Area Code	Number  Number  Number Ex	
	cks, please indicate any oth years of age)? Yes		vhich you have bee	n employed			
	, , , , , , , , , , , , , , , , , , , ,		ATION				
Circle highest grade comp	leted: 6 7 8 9 1	0 11 12 (	GED College:	1 2 3 4	5 6		
Dates Attended	Institution		Course of	f Study	Degree A	attained	
(no date necessary for high School)	High Schoo	ol					
	Address						
	College						
	Address						
	Graduate Scl	nool					
	Address						
Have you received any add	ditional training, workshops	, short courses, o	or performed volunt	eer work, etc. rela	ted to the posit	ion?	

## **EMPLOYMENT** HISTORY

Start with your present or last job and include your employment history **for at least the last 10 years.** Please fill out this section carefully and completely, since you are given credit only for jobs you list and dates you include. Please attach an additional sheet if you need more space. Include military experience and describe any major assignments. Include periods of self employment. Give details of any supervisory duties you may have had. Answer each and every question on all four pages of the application. A résumé may be submitted only to <u>supplement</u> information on the application. Résumés may not be used in place of any information requested on the application. Write "N/A" in the answer blank if the question is not applicable to you. Please type or print legibly.

If you are still employed, may your present employer be contacted? Yes  $\square$  No  $\square$ 

1. Employed by			
Address			
Supervisor's Name			Phone
Employed from (mo/yr)		To (mo/yr)	
Starting Salary	Final Salary		Hours Per Week
Job Title			
Duties			
Reason for leaving			
2. Employed by			
Address			
Supervisor's Name			Phone
Employed from (mo/yr)		To (mo/yr)	
Starting Salary	Final Salary		Hours Per Week
Job Title			
Duties			
Reason for leaving			
Have you previously worked for the City of Rockville? Yes	·	No	
Position Department		D	Oates
List the requirements in the job announcement which you	possess?		
Do you have any experience or qualifications not listed els	sewhere which re	ate to the job an	nlied for?

3. Employed by		
Address		
Supervisor's Name		Phone
Employed from (mo/yr)	To (mo	/yr)
Starting Salary	Final Salary	Hours Per Week
Job Title		
Duties		
Reason for leaving		
4. Employed by		
Address		
Supervisor's Name		
Employed from (mo/yr)	To (mo	/yr)
Starting Salary	Final Salary	Hours Per Week
Job Title		
Duties		
Reason for leaving		
Treason for leaving		
If the position for which you are applying requ	uires the operation of a motor vehicle, pl	lease answer the following:
Do you have a valid driver's license? Yes	No Class State	Number
Has your license been revoked or suspended (If yes, please explain)	I in the last twelve (12) months?	
What date would you be available to begin we	ork?	
For clerical/secretarial positions: Typing wpm	Shorthand wpm	
What equipment can you operate?		

authorization to work.	d non-citizens are rec	quired by Federal law to	provide proof of identification and
of race, creed, color, religion, sex, na	tional origin, ancestry, r	marital status, disability, p	against applicants or employees on the basis resence of children, sexual orientation, or femployment and to all personnel actions.
Are you a U.S. Veteran? Yes	No Branch of Se	ervice	
Type of Discharge		Date of	Military Service
	ed. (A conviction does r		I the facts. Do not list any criminal charges for at you cannot be appointed. When and what
statements or omissions made may edismissal regardless of when false or my previous employers to conduct or	eliminate me from furthe misleading statements participate in an investi I as may be necessary	er consideration for emplo or omissions are discove igation of my personal ba to verify the information p	ect. I understand that any false or misleading yment or may be grounds for immediate red. I authorize the City of Rockville and all ckground, work history, educational credenrovided in my employment application and to
Signa	ture of applicant		Date
I hereby understand and agree to the by them in the event of my terminatio			sponsible for the cost of the physical required ate of hire.
	Signa	ature of applicant	
			positions as defined by Article 27, Section county, incorporated city or town, or any
PROSPECTIVE EMPLOYMENT OR SIMILAR TEST OR EXAMINATION	ANY EMPLOYEE TO S AS A CONDITION OF I	SUBMIT TO OR TAKE A EMPLOYMENT OR CON	NY APPLICANT FOR EMPLOYMENT OR POLYGRAPH, LIE DETECTOR, OR TINUED EMPLOYMENT. ANY EMPLOYER CT TO A FINE NOT TO EXCEED ONE
	ed by Article 27, Section	on 727, or any employee o	es to everyone except applicants for law of any law enforcement agency of the State of .
	0:	oture of applicant	
	Signa	ature of applicant	

## **VOLUNTARY SURVEY**

## APPLICANT CHARACTERISTIC SURVEY

To All Applicants:

The City of Rockville has an equal employment program. To find out how effective our recruitment efforts are in reaching all parts of our population, and to help us in the validation of our selection methods, we are asking each applicant to voluntarily give the following information. THIS INFORMATION IN NO WAY AFFECTS YOU AS AN INDIVIDUAL APPLICANT AND WILL BE SEPARATED FROM YOUR APPLICATION IMMEDIATELY.

Position	Applied For	Zip Code (Home)	
	Please place the appropriate numbered answ the left.	er to each question in the block provided on	
	A. What sex are you?  1. Male  2. Female		
	B. Of which racial/ethnic group do you consider 1. White 4. Hispan 2. Black 5. America 3. Asian or Pacific Islander		
	<ul><li>C. Are you a veteran of the U. S. Military?</li><li>1. Yes</li><li>2. No.</li></ul>		
	2. 18-21 years, inclusive 6. 56-69	years, inclusive years, inclusive rs or over	
	<ul><li>E. Have you previously applied for a job here</li><li>1. Yes</li><li>2. No</li></ul>	9?	
	<ol> <li>What is the highest level of education you have reached?</li> <li>Finished 0-8 years</li> <li>9-12, but not a high school graduate</li> <li>High school graduate or GED from a state department of education</li> <li>Post-high-school vocational or business school training</li> <li>College, less than B.A., B.S., or similar professional degree</li> <li>B.A., B.S., or similar degree</li> <li>M.A. or similar professional degree</li> <li>Ph.D., J.D., L.L.B., or similar professional degree</li> </ol>		
	G. Are you currently employed? 1. Yes 2. No		
	<ol> <li>City employee</li> <li>Friend</li> <li>Newspaper or periodical</li> </ol>	you are now applying?  8. Television  9. Radio  10. School  11. Church  12. Community Organization	
	<ol><li>Job Service listing</li></ol>	Name of Organization 13. World Wide Web	